PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2004

Application or Docke: Number

CLAIMS AS FILED - PART I (Column 1) (Column:2)								TYPE		OR SMALL ENTITY		
			(Column	1)	(Colui	nn-21	ì				·	
TOTAL CLAIMS			25				'	RATE	FEE		RATE	FEE 95800
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC FEE	÷ ••	OR	BASIC FEE	400
TO1	TAL CHARGEA	BLE CLAIMS	45 minus 20=		. 25			XS 9=		ÖR	XS18=	450
	EPENDENT CL		7 minus 3 =		1 4			X44=		OR	X8 8 = .	352
MULTIPLE DEPENDENT CLAIM PRESENT						<u>e</u>		+150=		OR	÷380′=	3000
* If the difference in column his less than zero, enter "0" in column							^	TOTAL	<i>y</i>	OR	TOTAL	2052
CLAIMS AS AMENDED - PARTER								CHALL	ENTITY	OR	OTHER	
(Column 1) (Column 2) (Column 3) SMACE ENTITY												
MTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	• 5 G	Minus	- 4	15	= //	}	X\$ 9=		OR	XS18=	550.00
	Independent	. 8	Minus	***	7	= /		X43=		OR	X86≃	200.00
4	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT		T CLAIM		Ţ	+145=		OR	+290=	
• •					٠		•	TOTAL		OR	TOTAL	150,00
	ADDIT. FEE L								L	10	ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3	}					ADDI-
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	TIONAL
	Total	•	Minus	••				XS 9=		OR	X\$18=	·
	Incependent	•	Minus	m===		-	╣.	X43=		OR	X86=	
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
		• .					•	TOTAL		OR	TOTAL	
							٠.	ADDIT. FEE	<u> </u>	1011	ADDIT. FEE	
		(Column 1)	•	(Colu	mn 2)	' (Column 3	3)	•				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		= .		X\$ 9=		OR	X\$18=	
MEN	Independent	•	Minus	•••	<u>:</u>	<u> -</u>	4	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1	+290=	
+145=										OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate be										OR x in c	TOTAL ADDIT. FEE olumn 1.	
	The *Highest Nur	mber Previously Pr	BIC FOT (ICTA) (noepen u	·	e mgreat nem		-				<u>. </u>
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III. Conclusion

In view of the claim amendments and remarks herein, the application is in condition for allowance.

Authorization is hereby given to charge any fee due in connection with this communication to Deposit Account No. 23-1703.

Respectfully submitted,

Reg. No. 32,224

White & Case LLP Customer No. 07470

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